



P.O. Box 2959, Winston-Salem, N.C. 27102
Phone (800) 862-4338
For Manufacturer's UPC No., Refer to Price List

SALES COPY
INVOICE

ACCOUNT NO.	INVOICE DATE	INVOICE NO.	MR.
7614060	07/15/98	198-0052	10-07
WAREHOUSE		CARRIER	
011 LAFLIN			

BILLING
ADDRESS

KLEIN CANDY CO.
A PA LIMITED PARTNERSHIP
P. O. BOX 1450
WILKES-BARRE PA 18703

SOLD TO/
SHIP TO

KLEIN CANDY COMPANY
A PA LIMITED PARTNERSHIP
100 WEST END ROAD
WILKES-BARRE PA 18702

SPECIAL INSTRUCTIONS: 800998 - SAL JUL B1G1F NY -3
FOR NY ST USE

PRINT DATE	SHIP DATE	BL NUMBER	PURCHASE ORDER OR CONTRACT NO.	MARK	ORDER SOURCE	ORDER DATE	DIVISION	COPIES	OPERATION
07/14	07/15	198-0052	16002	MAIL	SALES	06/24	1822	1***	WGZY8
QUANTITY	ITEM NO.	SIZE/CTNS	ITEM NAME	UNIT QUANTITY	ITEM PRICE	BILLING AMOUNT			
8	17528	6M 30	SALEM SLIDE BOX B1G1F	48,000	430.2000	3,441.60			
8	17828	6M 30	SALEM LT SLIDE BOX B1G1F	48,000	430.2000	3,441.60			
LESS CREDIT FOR FREE PRODUCT						3,441.60-			
DISCOUNTABLE GROSS						3,441.60			
STD TERMS DISCOUNT OF 3.25%						111.85-			
LESS HANDLING ALLOWANCE						111.86-			
EFT DISCOUNTABLE AMT						3,217.89			
EFT TERMS DISCOUNT OF .50%						16.09-			
LESS STATE TAX FOR FREE PRODUCT						1,344.00-			
TOTAL QUANTITY	SHIP WEIGHT	THOUSAND CIGT	TERMS	Credit Terms Start on Invoice/Sched. Delivery Date	DUE	TERMS DISCOUNT(S)	INVOICE AMOUNT		
16	363	96	PAYMENT BY EFT		07/15	127.94-	1,857.80		
		20'S 96	OTHERWISE PAST DUE				1,985.74		

*** E F T INVOICE *** WILL DRAFT ON 07/15

01-0012-014 -7614060-A1EA00

10000007

RJ REYNOLDS

TOBACCO COMPANY

J. CAMPBELL / ROU 1610
PROMOTIONAL COORDINATOR

8899 MAIN STREET
WILLIAMSVILLE, NY 14221
(716) 634-4179
FAX (716) 634-3145

DATE:

7-27-98

PROMOTION #

800998

 Fax
J. McLean

KLEIN CANDY / GRATIS TAX REIMBURSEMENT

Hi Jim,

Attached is ***RJRT Gratis Tax Reimbursement Request Form*** for Klein Candy, SIS #761406. Please have Klein sign and forward to Kay Wagner for processing.

Thanks for your help - any questions, let me know.

Sincerely,

Judy

J. Campbell
Promotional Coordinator / 1610
/jc

51844 5521

PLEASE MAIL OR FAX TO:

Date 03/24/97

Customer Account # 761406

Name KLEIN CANDY (CORRECTED REQUEST)

Street Address 100 WEST END ROAD

City WILKES-BARRE

City _____ PA
State _____

Zip Code 18702

RJR Invoice # 196-0052

Dir. Account Invoice # N/A

Total Gratis CTNS (Report gratis product only): State 240.00 City 240.00

City	240.00
------	--------

County

Total Gratis S/TMS (Report gratis product only):	State	1,344.00	City	192.00
Total Gratis TAX (Report gratis product only):	State		City	

City	192.00
City	

County
County

Brand Name(s) 800998 BTG1F: 8 (6M) CASES: SALEM SLIDE BOX / SALEM LT SLIDE BOX

List Type Tax (State, County, City, Handling) and Jurisdiction, Rate per CTN, Number of Cartons Stamped.

51844 5522

Completed By _____

RJR Rep. _____

Direct Acct Rep. _____

Total Tax Expense From Page 1	1,536.00
-------------------------------	----------

Total Tax Expense From Page 2

Total Tax Expense	1,536.00
-------------------	----------

Total Tax Expense	1,344.00
Less Amount Deducted From Invoice	

Amount Due Direct Account	192.00
---------------------------	--------

Amount Due RJR _____

IMPORTANT NOTE: The following attachments **MUST** accompany this request: (1) Copy of RJR Invoice; (2) Copy of Direct Account Invoice

R.JRT Form 3507 - WML 7/15/98